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ABSTRACT

A program was developed to improve the toileting skills of four prekindergarten students (ages 3-5) with developmental delays. A daily toileting chart was employed over a 12-week period. During toileting attempts, each child was encouraged to pull down and pull up pants by using verbal prompts. Success at this activity resulted in placement of a sticker on the child's self-help table. On each toileting occasion, the child was verbally encouraged to attempt to use the toilet, and verbal praise stated what the child had accomplished. Turning on the water and washing hands after using the toilet were also target behaviors. During week 5 of the intervention, the data were examined for patterns in elimination times, or liquids were introduced at specific intervals when no patterns emerged. During week 6, the child was taken to the toilet at the times the child was likely to have to eliminate, and during week seven toileting times were spread further apart. Next, verbal prompts were faded and the child was praised for expressing the need to go to the toilet. A decrease in accidents resulted in no longer using the toileting charts. Sample charts are appended. (Contains 12 references.) (SW)

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ED 385 113

DEVELOPING A PROGRAM TO IMPROVE TOILETING SKILLS OF PREKINDERGARTEN HANDICAPPED STUDENTS IN A SUBURBAN ELEMENTARY SCHOOL

by

Ellen Kingston

A Final Report submitted to the Faculty of the Fischler Center for the Advancement of Education of Nova Southeastern University in partial fulfillment of the requirements for the degree of Master of Science

The abstract of this report may be placed in the University database system for reference.

May, 1995

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ABSTRACT

Development and Implementation of a Program to Improve Toileting Skills of Prekindergarten Handicapped Students. Kingston, Ellen, 1995. Practicum Report, Nova Southeastern University, Abraham S. Fischler Center for the Advancement of Education.
Descriptors: Prekindergarten/Early Intervention/Early Childhood/Handicapped/ Exceptional Students/Toilet Training/ Self-Help Skills.

This program was developed to improve the toileting skills of prekindergarten exceptional students. The problem was identified as the lack of a program providing consistency and assistance in teaching toileting skills to prekindergarten exceptional education students. The objectives for this program include a 20 percent increase in toileting skills and in the ability to pull down and pull up pants before and after toileting, as well as a 30 percent increase in the ability to wash hands after toileting. Solution strategies included are monitoring toilet use and self-help skills through the use of charts, tables, verbal prompts, and token rewards. All program objectives were surpassed by all members of the target group. Appendices include daily a toileting chart and self-help table.

Authorship Statement/Document Release

Authorship Statement

I hereby testify that this paper and the work it reports are entirely my own. Where it has been necessary to draw from the work of others, published or unpublished, I have acknowledged such work in accordance with accepted scholarly and editorial practice. I give this testimony freely, out of respect for the scholarship of other workers in the field and in the hope that my work, presented here, will earn similar respect.

Ellen Kingston
student's signature

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CHAPTER I

Purpose

The school was situated in a surburban area of South Florida. Approximately 10 percent of the student population were bused to the site from the inner city pending completion of a new school. The school included prekindergarten through grade five and had an enrollment of 1,031 students. The ethnic makeup of the school was 46% White, 41% Black, 10% Hispanic, 2.7% Asian, and .3% Indian. Of the entire student population, 47.5% were eligible for free or reduced-price lunch. The average class size consisted of 29 students.

The target school had an educational alternative program in conjunction with the state dropout prevention programs. Thirty-three students were enrolled in this program. Chapter I Basic and Migrant Education Programs had an enrollment of 103. The target school served 27 full-time emotionally handicapped students and 10 full-time specific learning

disabled children. There were 53 part-time specific learning disabled students and 32 English for Speakers of Other Languages students in attendance. The site had two prekindergarten exceptional student units. Of the 25 students enrolled in prekindergarten classes, there were three educably mentally handicapped children and two physcially handicapped students. All of the prekindergarteners had developmental delays and had been labelled as having speech and language delays. Each of the prekindergarten classes had a full time teacher, a full time assistant, and a half time speech pathologist.

The writer of this practicum, who was teaching fifth grade, had taught in South Florida for six years. Although there was no prekindergarten class at the writer's home school, the writer had spent three summers teaching exceptional prekindergarteners prior to attending the target site.

Problem Statement

Although the students in the target group were developing good social skills, they lacked self-help skills in the areas of toileting and dressing. Lack of self-help

skills prevents the child from becoming independent and advancing socially.

The target group consisted of four children in the prekindergarten exceptional student program. Two of the children were four-year-old boys, one was a three-year-old boy, and one was a five-year-old girl. All members of the target group were developmentally delayed and had speech and language delays. One of the aforementioned boys had extremely limited expressive language. All of these children had demonstrated responses to verbal prompts. The girl had Down's Syndrome. All members of the target group were experiencing delays in the gross motor skills area.

During initial observation of the target group, the writer of this practicum noted that the target population lacked self-help and toileting skills. Over a six hour period all members of the target group experienced problems with enuresis, voiding urine involuntarily (Appendix A, p.31).

The girl and the three-year-old boy wore diapers, while the other two boys wore underpants. None of the target group demonstrated the ability to pull down their pants when in the

bathroom. The writer observed that the three-year-old and one of the four-year-old boys were able to pull up their pants with assistance after leaving the toilet. Neither the girl nor the other four-year-old boy in the target group demonstrated an ability or interest in redressing after being put on the toilet. All of the children in the target group had individual education plans which included toilet training as one of their objectives.

The members of the target group were in a class with an enrollment of 13 children between the ages of three and five years of age. Although there was a full time teacher, a full time assistant, and a half time speech pathologist assigned to this class, not all three adults were with the children at the same time. The writer observed that the average ratio of students to adults was 6:1.

The main focus of this class was to enhance speech and language development while fostering social skills and improving gross and fine motor skills. While attempting to meet the various needs of 13 students in a class with a mix of mentally handicapped, speech and language impaired, and physically handicapped students in the same room, the adults

were hard pressed to check on the children's need to use the toilet on a regular basis.

Although toilet training was an objective in each member of the target group's individual education plan, the time constraints involved in meeting the needs of the members of the class prevented the staff from devoting sufficient time and consistency to toileting skills. The writer identified the problem as a need for a program which provided consistency and assistance in teaching toileting skills to exceptional prekindergarten children.

The proposal objectives were:

Objective One

Within a 12 week period the target group will demonstrate a 20 percent improvement in toileting skills as evidenced by recordings on the daily toileting chart (Appendix B, p.33).

Objective Two

During a 12 week period the target group will show a 20 percent increase in the ability to pull down and pull up pants before and after toileting as indicated by stickers on the self-help table (Appendix C, p.35).

Objective Three

During a 12 week period the target group will demonstrate a 30 percent increase in the ability to wash hands after toileting as evidenced by teacher observation tallies on the self-help table (Appendix C, p.35).

CHAPTER II

Research and Solution Strategy

Toileting skills are an important part of a child's development on the road to becoming independent and socially accepted. Children develop these skills at different times and only when they are ready.

According to Spock (1992) the earliest stages of developing a sense of responsibility for oneself are manifested simultaneously with toilet training. Along with cleaning up after play and the demonstration of cognizance that certain things belong in certain places, a concurrent awareness develops regarding toileting. The child begins to comprehend that everything has its place, and that wastes, i.e. urine and stool, belong in the toilet. Supporting Spock's theory are Lief and Thomas (1991) who regard the child who puts toys away and cleans up after play as one who is demonstrating readiness for toilet training.

The child must achieve a physcial awareness before the child is ready to be toilet trained, according to the

findings of Steinberg, Williams, and DaRos (1992). The child demonstrates a readiness which comes with developing muscle control as well as an increased capacity for holding liquid in the bladder. Shortly after these developments comes an awareness of feeling full and a sensibility of the need to void.

In addition to sensing a feeling of pressure in the bladder or in the rectum, Lief and Thomas (1991) identify verbalization about elimination as another sign of readiness for toilet training, even if this verbalization comes after the child has voided. When the child uses words like "pee pee" and "poo poo" the child is demonstrating an awareness of bodily functions. Honig (1993) states that the child's labels of "pee" and "poo" are the child's own way of stating an awareness of bodily wastes . Additionally, Honig stresses the ability to sit for long periods of time as another readiness skill. She warns that verbalization is not achieved by all children and that caregivers should look for other signs the child may exhibit. For example, the child may clutch himself or herself as the child becomes aware of the need to void. Adults should be alert to such physical cues.

Rubin and Fisher (1982) suggest that adults and children will better understand the long process of toilet training if the process is broken down into small steps. The child has to understand what is expected of him/her. The child has to learn what it feels like to have a full bladder or bowel. Additionally, the child has to acquire the ability to "hold it" until the child reaches the toilet, and then finally, the child has to learn to relax the sphincter muscles.

McClurg (1986) breaks down the process of toilet training Down's Syndrome children into six distinct steps. These involve pulling down pants, sitting on the toilet without help, wiping after elimination, pulling up pants, flushing, and washing hands without assistance.

The findings of Rubin and Fisher (1982) conclude that children learn bowel control first, followed by daytime bladder control, and finally nighttime bladder control. Subsequently, toilet training will progress more easily if the child has bowel movements at the same time each day.

McClurg (1986) suggests the establishment of and strict adherence to a schedule. Furthermore, she intimates that if

a schedule is not followed, toilet training will become a frustrating task for all involved. One possible schedule includes having three to six toileting trips per day, with each attempt lasting approximately ten minutes in duration. Preferred times for these sessions are upon waking, after meals, and before bed time. One or two midmorning sessions might also be considered.

Spock (1992) hints at recording the time of daily bowel movements. Once a pattern of bowel movements becomes evident, then the time that the child is likely to have a bowel movement can be determined. The child can then be taken to the bathroom at these "likely" times. When a regular time has been established for bowel movements, bowel control will progress (Lief & Thomas, 1991).

Mather (1976) advises using a schedule and reinforcing appropriate toilet usage with praise and, initially, small token rewards (Appendix D, p.37). Fading tokens early in the toilet training process will encourage self-motivation.

Cary (1994) also believes in using a token reward system. Each time the child is successful on the toilet,

the child is given a velcro-backed puzzle piece to attach to a board. Over a period of days, the puzzle pieces fit together to form a complete picture.

Hoben (1989) from the Waverly Oaks Child Development Center in Waltham, Massachusetts, suggests that children go to the bathroom at the same time as other children who are at varying stages of toilet training. At Waverly Oaks, children are taken to the bathroom approximately every half-hour once readiness is shown. Children are given magazines and books to peruse while on the toilet. If the child performs, the child is praised , but praise in not overdone.

Brazelton, as cited by Spock (1992), believes in putting the child on the toilet only if a desire to use the toilet is expressed. By the same token, Brazelton states that the child should be permitted to get off the toilet as soon as the child expresses such a desire. Self-motivation, i.e. using the toilet because one wants to feel more grown up, is Brazelton's basic philosophy.

Accidents will happen during toilet training. If the child is not reprimanded, Lief and Thomas (1991) believe the

child will more rapidly become aware of the need to eliminate. As the awareness of need increases, the likelihood of reaching the toilet in time also increases.

Early interventionists and childcare workers should be aware of the social-emotional impact involved in toileting. The child's sense of self and attitudes towards independence can be affected by experiences during toileting (Feeney, Christensen, & Moravcik, 1991). A bathroom experience can be made more pleasant by making fixtures accessible. Using stools to aid in accessing the toilet and sink is recommended (McClurg, 1986). Additionally, McClurg suggests that the child get off the toilet before flushing so the child will not become frightened. Encouraging the child to flush after dismounting may further good toileting habits.

Spock (1992) makes suggestions to provide comfort while facilitating toileting skills. Urine guards on potty seats may make it difficult to get on and off the potty. These are not recommended because the difficulty and possible pain caused by the guard will be a deterrent to potty usage. Furthermore, clothes that come on and off without difficulty may increase the chances of the child having success at

dressing and undressing for toilet usage. Furthermore, clothes that come on and off without difficulty may increase the chances of the child having success at dressing and undressing for toilet usage.

When a child has an "accident," Hoben (1989) suggests that adults should show no disapproval. Instead Hoben offers that this time be used as an opportunity to verbalize a helpful reminder to the child to try to go on the toilet the next time. Conversely, Mather (1976) prefers planned ignoring while cleaning the child. Mather states this lack of response and eye contact will be so displeasing to the child that the child will make every effort to avoid another accident.

A program entitled Positive Practice has proven effective in toilet training exceptional children (Dunklee, 1989). Positive practice is a six step program whereby the child is given many liquids to encourage elimination. The program involves the use of verbalization and charts combined with rewards and detractors. When the child has an accident, the child feels the wet underpants and, with assistance, the child pulls the pants down.

Next, the child is put on and off the toilet briefly. The child is then put in a chair while the adult holds food near the child's mouth, saying the child's name and, "Wet, no eat." This procedure is repeated five more times. Following these six steps, the child is put in dry pants and is checked every 30 seconds for dryness. Each time that the child is checked, the child feels dry pants and the adult says, "(child's name) dry, good boy (girl)." Additionally, charts are kept to record all of the wet and dry checks.

According to Bredekamp (1987), The National Associaton for the Education of Young Children (NAEYC) states that permitting the child to give cues, encourageing the child by giving verbal prompts, taking the child to the toilet frequently, and using praise are appropriate practices. The NAEYC also endorses the use of clothing that the child can manage to get on and off without difficulty.

Additionally, Bredekamp suggests that routines, such as toileting, can help regulate the child's behavior. Peterson (1988) refers to developmental milestones. Success in one developmental domain moves the child towards successes in

other developmental domains. The child's success in toileting skills can result in successes in other areas.

The writer of this practicum agreed with Rubin and Fisher (1982) that the child learns to control bowel movement before the child is trained to urinate on the toilet. The writer of this practicum used a combination strategy, employing the ideas of McClurg (1986), Mather (1976), and Spock (1992) by implementing the use of a toileting schedule in the form of a chart. The writer focused on the basic steps which McClurg refers to in the toilet training process. These are pulling down and pulling up pants, elimination on the toilet, and washing hands. In an effort to make the toilet and sink more accessible, the writer utilized the suggestions of Feeney, Christensen, and Moravcik (1991). The writer confirmed the appropriate practices of the NAEYC as cited by Bredekamp (1987), and incorporated using praise, verbal prompts, and frequent toilet trips in conjunction with the chart. As a solution strategy, the writer employed the use of charts, token rewards, and verbal praise to establish a program for improving toileting skills of

prekindergarten exceptional students.

CHAPTER III

Method

The writer enlisted the classroom teacher, the teacher's aide, and the speech therapist to assist in the implementation process for a twelve-week period. The writer was based at another school and could not be present for each toileting incident. The cooperation and involvement of the aforementioned adults assisted in the monitoring and the consistency of the program.

Week 1

Placed stools in front of the toilet and sink for easy access of the target group. Conferenced with parents and requested that members of the target group wear clothing that came off and on easily to facilitate independence in pulling up and down pants. The writer requested that the two students who wore diapers be permitted to wear pull-up diapers. Pull-up diapers will also be supplied for use in the classroom.

Initiated the use of daily toileting charts for each member of the target group and recorded the appropriate information on the charts (Appendix B, p.33). During toileting attempts, encouraged each child to pull down and pull up pants by using verbal prompts. Used physical assists only when necessary. Each time the child successfully pulled down or pulled up pants gave the child a sticker to place on the child's self-help table (Appendix C, p.35). Asked if the child was able to turn on the water without assistance. Aided in the handwashing process only when necessary. Praised the child for attempting to wash hands independently Recorded tallies of successful handwashing attempts on the self-help table (Appendix C, p.35).

Week 2

Enlisted the classroom teacher, teacher's aide, and the speech therapist to assist with updating the toileting charts (Appendix B, p.33), and self-help tables (Appendix C, p.35). On each toileting occasion verbalized that the child was going to attempt to lurinate or have a bowel moevemnt on the toilet. Each time the child was successful on the toilet gave verbal praise stating specifically what the child had accomplished.

Assisted with pulling down and up pants when necessary, and told the child of these actions. After each toileting attempt assisted the child with climbing on the stool in front of the sink and assisted with washing the child's hands when necessary. Talked to the child about handwashing while this action was taking place.

Week 3

Continued the strategies listed above. Encouraged each child to climb on the stool and to sit on the toilet without assistance by using verbal prompts.

Week 4

Continued the strategies already in place. Gave verbal praise to each child for sitting on the toilet without assistance and for climbing on and off the stools without assistance.

Week 5

Explored charts for patterns of times of urination and bowel movements. Noted these times with highlighter. If no pattern had emerged, considered the possibilty of introducing liquids at specific intervals and re-starting the charting procedure. Patterns were visible and the introduction of liquids was not necessary.

Week 6

For each target group member, referred to the toileting charts and took the child to the toilet at the highlighted times, i.e. the times the child was likely to have the need to use the toilet. At each of these bathroom trips asked the child if the child had to use the bathroom. If the response was "no," took the child to the bathroom and encouraged the child to try to void on the toilet. Continued recording information on the toileting charts and on the self-help table. Continued the use of verbal prompts and verbal praise.

Week 7

With parental permission, discontinued the use of pull-ups. All members of the target were put in underpants at this time. Took each target group member to the bathroom five minutes later than the time previously designated on the toileting chart. This spread toileting times further apart and encouraged bowel and bladder muscle control.

Week 8

Week seven's adjustments were successful. Proceeded to delay toileting times an additional ten minutes during week

eight. Worked towards four to five bathroom trips daily. Adjusted the chart times accordingly and continued to record toileting information.

Week 9

Reviewed toileting charts for toileting accident times. No schedule adjustment was necessary. Faded verbal prompts for handwashing attempts, but continued verbal praise after successful completion of the task. Continued recording tallies.

Week 10

Faded verbal prompts and elicited verbalization for the need to use the toilet by praising the child each time the child verbalized the need to go to the restroom. Faded the verbal praise for success on the toilet. Continued use of the self-help table and the toileting charts.

Week 11

Examined the toileting charts for a decrease in toiletig accidents. There was evidence of a decrease, and the use of the toileting charts was faded. Faded the use of the self-help table and used only verbal praise.

Week 12

Gathered all data from objectives one, two, and three.

Gathered evaluative comments from the classroom teacher, the teacher's aide, and the speech therapist. Analyzed the final data.

CHAPTER IV

Results

The writer chose to target the areas of toileting usage, dressing and undressing before and after toileting, and washing hands without assistance after toileting as objectives. Objective one stated: Within a 12 week period the target group will demonstrate a 20 percent improvement in toileting skills as evidenced by recordings on the daily toileting chart (Appendix B, p.33).

The writer compiled the data from each member of the target group's week one chart (Appendix E, p.39). After examining the compiled chart the writer found that the target group performed on the toilet 16 times. Each of these times was accompanied by a verbal prompt or assistance from an adult. There were no requests by members of the target group to use the toilet. The total number of times members were wet was 37, and there were three incidences of accidental bowel movements. Of the 60 bathroom opportunities, target members had 40 accidents.

Target members successfully used the toilet 33 1/3 % of the time during week one.

During week 11, out of 20 bathroom opportunities, there were only two accidents for a success rate of 90 %. Furthermore, during week 11, target members requested to use the toilet on 20 different occasions. In comparison, during week one there was not a single request.

By comparing the compiled toileting chart from week one with the compiled chart from week 11, the writer found an increase of 56 2/3 % in successful toilet usage by target members (Appendix E, p.39). Objective one was met.

Objective two stated: During a 12 week period the target group will show a 20 percent increase in the ability to pull down and pull up pants before and after toileting as indicated by stickers on the self-help table (Appendix C, p. 35).

During week one the target group successfully pulled down and pulled up pants during toileting attempts 12 % of the time (Appendix F, p.41). During the eleventh week, target members demonstrated the ability to dress during toileting attempts 86 % of the time. By comparing the week 11 and the

week one self-help tables, the writer found a 74 % increase in the ability of target members to undress and dress before and after toileting (Appendix F, p.41). Objective two was clearly met.

Objective three stated: During a twelve week period the target group will demonstrate a 30 percent increase in the ability to wash hands after toileting as evidenced by teacher observation tallies on the self-help table (Appendix C, p.35).

The target group washed hands after toileting only 25 % of the time during week one (Appendix F, p.41). On examining the week 11 table, the writer found target members washed hands after toileting 100 % of the time. After comparing the week one self-help table with the week 11 table, the writer found the target group demonstrated a 75 % increase in the ability to wash hands after toileting. Objective three was met.

CHAPTER V

Recommendations

The writer has offered to give a presentation at the area training session for prekindergarten exceptional student educators in the county. The writer will share this practicum with other speech-language therapists involved in prekindergarten programs. The writer has offered to share this program with local pediatricians and at area hospitals. The writer will make a presentation to the Easter Seals and Association of Retarded Citizens prekindergarten exceptional children's programs explaining how to set up and follow through with toileting and self-help charts. The writer will propose follow up visits for support in carrying out this program. The writer will submit articles to Exceptional Parent, Exceptional Children, and Topics in Early Childhood Exceptional Education. The writer will contact area universities and offer to guest lecture to early childhood

and exceptional education majors on how to teach self-help and toileting skills. Local Head Start programs will be contacted and the writer will share this program with parents and staff members.

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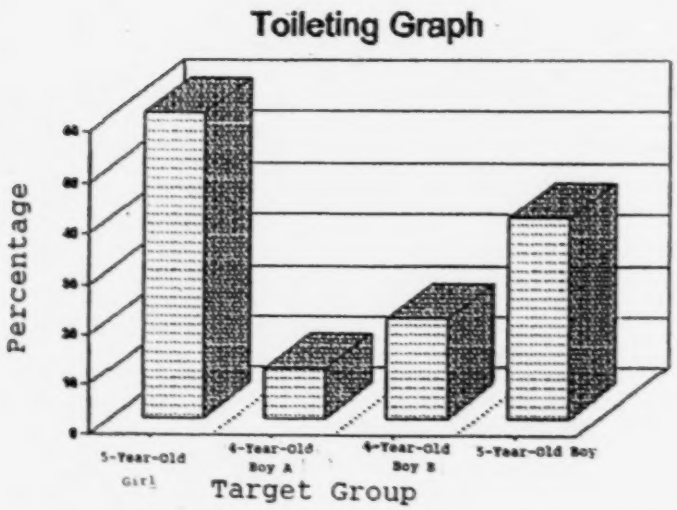
APPENDICES

APPENDIX A

Six Hour Observation/Documentation

APPENDIX A

Six Hour Observation/Documentation



The graph indicates the percentage of times members of the target group were found to have wet pants/diapers during the initial six hour observation period. During the course of this pre-implementation, the children were taken to the bathroom on five occasions. The three-year-old boy wet his diaper three times. One four-year-old boy wet once, and this occurred during nap time. The other four-year-old boy was found to be wet one time. The five-year-old girl was wet three times.

APPENDIX B

Daily Toileting Chart

APPENDIX B

Daily Toileting Chart

Time	M	T	W	TH	F
8:00					
8:30					
9:00					
9:30					
10:00					
10:30					
11:00					
11:30					
12:00					
12:30					
1:00					
1:30					

KEY
W = wet
D = dry
BM = bowel movement
* = performed on toilet

Child's name _____
Week _____

Adapted from Learning Can Be Child's Play, J. Mather, Abingdon Press.

APPENDIX C

Self-Help Table

APPENDIX C

Self-Help Table

	Mon.	Tues.	Wed.	Thurs.	Fri.
Name					
Name					
Name					
Name					

Week ____

Key: Sticker indicates child pulled down and pulled up pants during toileting attempts.

\+ Indicates child washed hands without assistance.

APPENDIX D

Permission Letter

APPENDIX D

Permission Letter

1495 Hindship Circle
Wellington, Florida 33414
November 7, 1994

Rights and Permissions
Abingdon
P.O. Box 801
Nashville, Tennessee 37202
Dear Mrs. Shaw,

I am writing my practicum for my master's degree in prekindergarten exceptional student education at Nova University. I request permission to use the toilet training chart on page 41 of *Learning Can Be Child's Play* by June Machover, ISBN 0-687-21317-7, published in 1976 by Abingdon.

Thank you for your consideration. Your prompt reply is appreciated.

Sincerely,
Ellen Kingston

We are glad for you to quote as ... like, in order you credit ... author, book, and Abingdon Press.

Abingdon Press, By: Geraldine Shaw
Editor

W = wet
D = dry
bm = bowel movement
V = performed in training chair

Time	M	T	W	T	F	S	S
7:00 AM	bm	W	W	W	W	W	bm
8:00	DV	bm	DV	DV	DV	bm	DV
9:00	D	D	D	D	bm	DV	D
10:00	D	D	DV	bm	D	D	W
11:00	W	W	bm	D	W	W	D
12:00	D	D	W	W	D	D	DV
1:00 PM	W	W	DV	DV	W	W	W
2:00	D	D	D	D	D	D	D
3:00	W	W	W	W	W	W	W
4:00	D	D	W	D	D	DV	W
5:00	DV	DV	D	D	DV	D	DV
6:00	W	D	D	W	W	W	D
7:00	bm	W	W	D	D	D	W

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APPENDIX E

Compiled Toileting Charts

APPENDIX E

Compiled Toileting Charts

WEEK ONE COMPILED DATA CHART

	Monday				Tuesday				Wednesday				Thursday				Friday			
	Student				Student				Student				Student				Student			
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Time																				
8:00	D	D	D	W	D	D	W	D	D	D	W	D	D	D	A	A	D	D	W	W
8:30	D	D	W	D	*	D	D	D	D	D	D	W	D	D	W	A	D	D	D	D
9:00	D	W	D	D	D	D	D	W	D	D	D	D	D	D	D	A	W	D	D	D
9:30	D	D	D	D	D	*	D	D	W	W	D	D	D	D	D	A	D	*	D	D
10:00	W	D	D	D	D	D	A	D	D	D	D	D	D	*	D	D	D	D	D	W
10:30	D	D	D	W	D	D	W	D	D	D	W	W	W	D	A	W	D	D	D	D
11:00	D	D	W	D	W	D	D	D	D	D	D	D	D	D	*	D	*	D	W	D
11:30	D	*	D	B	D	D	D	W	*	D	D	D	D	D	D	D	D	D	D	D
12:00	*	D	D	D	D	W	D	D	D	D	D	B	D	W	D	D	D	D	D	D
12:30	D	D	D	D	*	D	D	D	D	W	W	D	D	D	D	D	D	W	D	W
1:00	D	W	W	D	D	D	B	D	D	D	D	W	*	D	W	*	*	A	D	D
1:30	*	D	D	W	D	D	D	*	*	D	D	D	D	D	D	D	D	A	W	D

During week one, the target group successfully performed on the toilet 33 1/3% of the time.

WEEK 11 COMPILED DATA CHART

	Monday				Tuesday				Wednesday				Thursday				Friday			
	Student				Student				Student				Student				Student			
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Time																				
8:00	D	*	*	*	D	D	D	*	D	D	*	D	D	*	D	*	D	D	*	*
9:30	*	D	D	W	*	*	*	D	*	*	D	D	*'	D	D	D	*'	*'	D	D
11:00		*'	*'												*'					
11:30	*'	D	D	*	*	*	*	*	D	D	D	*	*'	*'	D	W	D	*'	D	*
12:00									*'		*'						*'			
1:00										*'									*'	
1:30	*'	*	*	*	*'	*'	*	*	D	D	D	*	D	*'	*	D	D	*'	D	*

During week 11, the target group performed on the toilet successfully 90% of the time.

KEY: W = Wet * = Performed on toilet with prompt D = Dry
A = Absent from room *'= Requested to use toilet and performed B = Bowel movement

APPENDIX F

Completed Self-Help Tables

APPENDIX F

Completed Self-Help Tables
Dressing/Undressing and Handwashing Charts

Week One Self-Help Table

	Mon.	Tues.	Wed.	Thurs.	Fri.
Student 1		+	*+	*+	*+
					*+
Student 2		+		*+	+
Student 3				+	
Student 4	+	+	+	+	+
				+	

KEY: * Represents sticker. Child pulled down and pulled up pants during toileting attempts.
+ Represents teacher tally. Child washed hands after toileting.

Week 11 Self-Help Table

	Mon.	Tues.	Wed.	Thurs.	Fri.
Student 1	*+	*+	*+	*+	*+
	*+	*+	*+	*+	*+
	*+	*+			
Student 2	*+	*+	*+	*+	*+
	*+	*+	*+	*+	*+
	+	*+		*+	*+
Student 3	*+	*+	+	*+	*+
	+	+	*+	+	+
	+	*+			
Student 4	*+	*+	*+	*+	*+
	*+	*+	*+		*+
	*+	*+			*+

KEY: * Represents sticker. Child pulled down and pulled up pants during toileting attempts.
+ Represents teacher tally. Child washed hands after toileting attempts.